

**Form DR-3: Notice of Dissolution**Date Posted:  
**7/17/03****Form DR-3  
ICFERS 7/98****Dissolution  
Notice**ID: **17258**Name: **Vote Vance Committee**Type: **County Candidate - Supervisor**

Status:

**For Office Use Only**Comm. # **17258**

Indexed

Audited **7/17/03**

Computer

Certified Date of  
Dissolution

Official Name of Committee

**Vote Vance Committee**

Address

**3324 Timber Ridge Dr**

City, State, Zip

**Fort Madison, IA 52627**

Phone

**(319)372-3193 ()-**Effective Date of Dissolution..... **5/20/03****dIANE Kearns**

Signature of Treasurer

**5/20/03**

Date Signed

**THIS BOX APPLIES TO CANDIDATE COMMITTEES ONLY:**

I, the candidate, certify that my candidate committee's cash balance is zero, all debts, obligations and loans have been paid or satisfied in accordance with law as shown on my committee's final report and all campaign property and leftover funds have been distributed in accordance with my committee's last filed Statement of Organization.

**Tracy R Vance**

Signature of Candidate

**5/20/03**

Date Signed